

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 OF 5703

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

Progressive Turnout Project

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blake, Suzanne, , ,

Mailing Address 7 Noonhill Rd

City
MedfieldState
MAZip Code
02052-3007FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
eClinicalWorksOccupation (for Individual)
Corporate Trainer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 16 | / | 2019 |

Transaction ID : VR05RS85N90

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Actblue

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744409.60

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 17 | / | 2019 |

Transaction ID : VR05RS85N90E

Amount of Each Receipt this Period

5.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kinsella, Philip, , ,

Mailing Address 135 Tokeneke Dr

City
North HavenState
CTZip Code
06473-4367FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

268.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | / | 15 | / | 2019 |

Transaction ID : VR05RS86Z90

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10.00